Quality Measure Identification Number by CMS Reporting Module

The table below documents CMS quality measures (QM) calculated using MDS 3.0 data and reported in a CMS reporting module. A unique CMS identification number (ID) is specified for each QM. The table serves two purposes:

1. The table indicates which QMs are associated with a CMS reporting module.

2. The table documents the CMS ID—the link to QM specification detail in the CMS' *MDS 3.0 QM User's Manual*. As various QM specifications are revised, the QM is given a new CMS ID and the older QM logical version (i.e., CMS ID) is retained. This allows for the possibility of a transition period when more than one version of the same QM can be reported simultaneously across reporting modules (e.g., a MDS 3.0 item set update). The National Quality Forum (NQF) identification number is included for reference.

The following CMS reporting modules are included:

*   **CASPER Reporting Quality Measure Reports** contain quality measure information at the national, state, facility and resident level for a single reporting period. Users are able to specify the reporting time frame. State and National comparison group data are calculated monthly on the first day of the month. Data calculation is delayed by two months in order to allow for submission of late and corrected assessments. Comparison data are not recalculated if assessments with target dates that fall in periods for which comparison group data were already calculated. Quality Measure data are calculated weekly for the assessments submitted since the previous week's data calculation.

*   **Nursing Home Compare (NHC)**, CMS' website contains quality measure information (as well as other details) for Medicare and Medicaid-certified US nursing homes. (Note: information for those nursing homes reporting less than 20 residents for short stay quality measures and nursing homes reporting less than 30 residents for long stay quality measures is not included.). The QM information is updated and posted quarterly. NHC reports the average adjusted QM values across the most recent three quarters.

*   **Five Star Quality Rating System** contains information on health inspections, staffing and quality measures. It is updated and posted quarterly. The Five Star module reports the average adjusted QM values across the most recent three quarters

*   **Facility and Resident Quality Measure Preview Reports**, available in the facility's shared folders on CMS' QIES website, display the quarterly numerator, denominator and reported percent values for each of the publicly reported MDS 3.0 quality measures and also displays the list of residents who triggered one or more of the publicly reported MDS 3.0 Quality Measures. The preview reports allow the provider to see their measure percent values prior to being posted on the Nursing Home Compare website. The preview

reports indicate the measure values for the most recent quarter (i.e., the QM value is based on a one quarter look back period). The quality measure data correspond with the NHC reporting cycle.

QMs by CMS Reporting Module—Column Headers

Quality Measure Label: A brief definition of the quality measure. The label refers to the one sentence definition of the QM as reported in the MDS 3.0 User's Manual. The QM label wording may not be identical across reporting modules. The User should refer to the CMS ID for QM cross-reference among reporting modules.

Short or Long Stay: Refers to the nursing home (NH) population used to calculate the quality measure. The short stay quality measure specifications are based on NH residents whose episode is less than or equal to 100 cumulative days in the nursing home at the end of the target period. The long stay quality measure specifications are based on NH residents whose episode is greater than or equal to 101 cumulative days in the NH at of the end of the target period.

CMS ID: the unique CMS identification number depicted as

 S = provider type (N = Nursing Home)

 nnn = three digit QM ID

 vv = logic version number for a QM (e.g., 01, 02, 03)

 rr = risk adjustment model number for a logic version (presented as 00 for QMs without risk adjustment. For risk adjusted QMs, the risk adjustment number starts at 01 for the initial model and parameters and is incremented up by 1 whenever the risk adjustment parameters values are updated.

Examples of incrementing the CMS ID:

N123.01.00—first logic version of the nursing home measure 123 (which has no risk adjustment model)

N234.02.00—second logic version of nursing home measure 234 (which has no risk adjustment model)

N567.01.01—first risk model/parameters for first logic version of nursing home measure 567

N345.02.02—second risk model/parameters for second logic version of nursing home measure 345

NQF ID: Specifies the National Quality Forum QM identification number for those QM endorsed by NQF. For further details see: http://www.qualityforum.org/qps/

CASPER: Certification and Survey Provider Enhanced Reports (CASPER) Quality Measure Reports. For further details see:
https://www.qtso.com/download/guides/casper/cspr_sec11_mds_prvdr.pdf

NHC: CMS' Nursing Home Compare website contains detailed information about all Medicare and Medicaid-certified nursing homes in the US, including quality measures. For further details see: http://www.medicare.gov/NursingHomeCompare/search.aspx?bhcp=1

Five Star: CMS' Five Star Quality Rating System contains information on health inspections, staffing and quality measures. For further details see: http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/Downloads/usersguide.pdf

Provider Preview: Facility and Resident Quality Measure Preview Reports. For further details see: https://www.qtso.com/providernh.html

Specifications for all CMS ID quality measures are contained in the *MDS 3.0 User's Manual V6.0* available at: http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIQualityMeasures.html

Quality Measure (QM) Label	Short or Long Stay	CMS ID	NQF ID	CASPER	NHC	Five Star	Provider Preview
Percent of Residents Who Self-Report Moderate to Severe Pain	Short	N001.01.00	0676	Yes	Yes	Yes	Yes
Percent of Residents with Pressure Ulcers That are New or Worsened	Short	N002.01.01	0678	Yes	Yes	Yes	Yes
Percent of Nursing Home Residents Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine	Short	N003.01.00	0680	No	Yes	No	Yes
Residents Who Received the Seasonal Influenza Vaccine	Short	N004.01.00	0680A	No	No	No	Yes
Residents Who Were Offered and Declined the Seasonal Influenza Vaccine	Short	N005.01.00	0680B	No	No	No	Yes
Residents Who Did Not Receive, Due to Medial Contraindication, the Seasonal Influenza Vaccine	Short	N006.01.00	0680C	No	No	No	Yes
Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine	Short	N007.01.00	0682	No	Yes	No	Yes
Residents Who Received the Pneumococcal Vaccine	Short	N008.01.00	0682A	No	No	No	Yes

(continued)

Quality Measures (QMs) by CMS Reporting Module

(MDS 3.0 User's Manual V6.0)

Quality Measure (QM) Label	Short or Long Stay	CMS ID	NQF ID	CASPER	NHC	Five Star	Provider Preview
Residents Who Were Offered and Declined the Pneumococcal Vaccine	Short	N009.01.00	0682B	No	No	No	Yes
Residents Who Did Not Receive, Due to Medial Contraindication, the Pneumococcal Vaccine	Short	N010.01.00	0682C	No	No	No	Yes
Percent of short-stay residents who newly received an antipsychotic medication	Short	N011.01.00	N/A	No	Yes	No	No
The Percent of Residents on a Scheduled Pain Medication Regimen on Admission Who Self-Report a Decrease in Pain Intensity or Frequency	Short	N012.01.00	0675 (with-drawn)	No	No	No	Yes

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Quality Measures (QMs) by CMS Reporting Module

(MDS 3.0 User's Manual V6.0)

Part B: Long Stay QMs

Quality Measure (QM) Label	Short or Long Stay	CMS ID	NQF ID	CASPER	NHC	Five Star	Provider Preview
Percent of Residents Experiencing One or More Falls with Major Injury	Long	N013.01.00	0674	Yes	Yes	Yes	Yes
Percent of Residents who Self-Report Moderate to Severe Pain	Long	N014.01.01	0677	Yes	Yes	Yes	Yes
Percent of High-Risk Residents with Pressure Ulcers	Long	N015.01.00	0679	Yes	Yes	Yes	Yes
Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine	Long	N016.01.00	0681	No	Yes	No	Yes
Residents Who Received the Seasonal Influenza Vaccine	Long	N017.01.00	0681A	No	No	No	Yes
Residents Who Were Offered and Declined the Seasonal Influenza Vaccine	Long	N018.01.00	0681B	No	No	No	Yes
Residents Who Did Not Receive, Due to Medial Contraindication, the Seasonal Influenza Vaccine	Long	N019.01.00	0681C	No	No	No	Yes
Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine	Long	N020.01.00	0683	No	Yes	No	Yes
Residents Who Received the Pneumococcal Vaccine	Long	N021.01.00	0683A	No	No	No	Yes

Quality Measures (QMs) by CMS Reporting Module

(MDS 3.0 User's Manual V6.0)

Quality Measure (QM) Label	Short or Long Stay	CMS ID	NQF ID	CASPER	NHC	Five Star	Provider Preview
Residents Who Were Offered and Declined the Pneumococcal Vaccine	Long	N022.01.00	0683B	No	No	No	Yes
Residents Who Did Not Receive, Due to Medial Contraindication, the Pneumococcal Vaccine	Long	N023.01.00	0683C	No	No	No	Yes
Percent of Residents with a Urinary Tract Infection	Long	N024.01.00	0684	Yes	Yes	Yes	Yes
Percent of Low Risk Residents Who Lose Control of Their Bowels or Bladder	Long	N025.01.00	0685	Yes	Yes	No	Yes
Percent of Residents Who Have/Had a Catheter Inserted and Left in Their Bladder	Long	N026.01.01	0686	Yes	Yes	Yes	Yes
Percent of Residents Who Were Physically Restrained	Long	N027.01.00	0687	Yes	Yes	Yes	Yes
Percent of Residents Whose Need for Help with Activities of Daily Living Has Increased	Long	N028.01.00	0688	Yes	Yes	Yes	Yes
Percent of Residents Who Lose Too Much Weight	Long	N029.01.00	0689	Yes	Yes	No	Yes
Percent of Residents Who Have Depressive Symptoms	Long	N030.01.00	0690	Yes	Yes	No	Yes

(continued)

Quality Measures (QMs) by CMS Reporting Module

(MDS 3.0 User's Manual V6.0)

<mark>**Part B: Long Stay QMs (continued)**</mark>

Quality Measure (QM) Label	Short or Long Stay	CMS ID	NQF ID	CASPER	NHC	Five Star	Provider Preview
Prevalence of Psychoactive Medication Use, in the Absence of Psychotic or Related Conditions	Long	N031.01.00	N/A	Yes	No	No	No
Percent of long-stay residents who received an antipsychotic medication	Long	N031.02.00	N/A	No	Yes	No	No
Falls	Long	N032.01.00	N/A	Yes	No	No	No
Anti-anxiety/Hypnotic Medication Use	Long	N033.01.00	N/A	Yes	No	No	No
Behavior Symptoms Affecting Others	Long	N034.01.00	N/A	Yes	No	No	No